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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration  
Submitted  
with Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

XY-001

First Named Inventor

TSIARKEZOS

**COMPLETE IF KNOWN**

Application Number

Filing Date

Group Art Unit

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVED STITCHBONDED FABRIC AND PROCESS FOR MAKING SAME

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

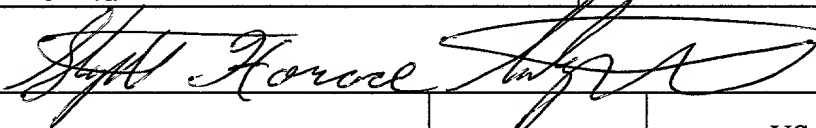
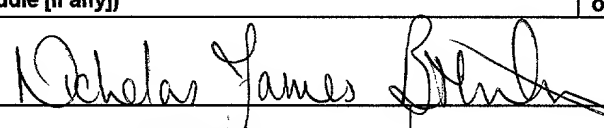


Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label		OR <input checked="" type="checkbox"/> Correspondence address below	
<b>Name</b> LAWRENCE ISAKOFF			
<b>Address</b> 1425 DRAKE ROAD			
<b>City</b> WILMINGTON		<b>State</b> DE	<b>ZIP</b> 19803
<b>Country</b> U. S. A.	<b>Telephone</b> 302-478-6522		<b>Fax</b> 302-478-6522
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF SOLE OR FIRST INVENTOR :</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any])		<b>Family Name</b> or Surname	
STEPHEN HORACE		TSIARKEZOS	
<b>Inventor's Signature</b>		<b>Date</b>	
		7/11/01	
<b>Residence: City</b>	<b>State</b>	<b>Country</b>	<b>Citizenship</b>
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<b>City</b>	<b>State</b>	<b>ZIP</b>	<b>Country</b>
ELKTON	MD	21921	USA
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any])		<b>Family Name</b> or Surname	
NICHOLAS JAMES		BROWNLESS	
<b>Inventor's Signature</b>		<b>Date</b>	
		28/6/01	
<b>Residence: City</b>	<b>State</b>	<b>Country</b>	<b>Citizenship</b>
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<b>Mailing Address</b> 162 SOUTHWELL ROAD EAST, RAINWORTH, MANSFIELD, NOTTINGHAMSHIRE			
<b>City</b>	<b>State</b>	<b>ZIP</b>	<b>Country</b>
		NG21 0EH	
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

Please type a plus sign (+) inside this box → +

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	HEREWITH
First Named Inventor	TSIARKEZOS
Title	STITCHBONDED FABRIC
Group Art Unit	
Examiner Name	
Attorney Docket Number	XY-001

I hereby appoint:

☐ Practitioners at Customer Number  →

Place Customer  
Number Bar Code  
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☒ Practitioner(s) named below:

Name	Registration Number
LAWRENCE ISAKOFF	26,283

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name

STEPHEN HORACE TSIARKEZOS

Signature

*Stephen Horace Tsiarkezos*  
6/20/01

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms are submitted

Please type a plus sign (+) inside this box → ☐

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I hereby appoint:

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OR

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### SIGNATURE of Applicant or Assignee of Record

Name

NICHOLAS JAMES BROWNLESS

Signature

Date

6/28/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 2 forms are submitted.

Burdan Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on